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Bib Data Sheet

CONFIRMATION NO. 4972

<b>SERIAL NUMBER</b> 09/880,107	<b>FILING DATE</b> 06/14/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1632	<b>ATTORNEY DOCKET NO.</b> 044921-5028
<b>APPLICANTS</b> Darci T. Horne, Gaithersburg, MD; Uwe Scherf, Gaithersburg, MD; Joseph Vockley, Damascus, MD;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/211,379 06/14/2000 AND CLAIMS BENEFIT OF 60/237,054 10/02/2000				
<b>** FOREIGN APPLICATIONS *****</b> none				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 12/03/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Signature</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 46
				<b>INDEPENDENT CLAIMS</b> 17
<b>ADDRESS</b> 009629				
<b>TITLE</b> Gene expression profiles in liver cancer				
<b>FILING FEE RECEIVED</b> 1257	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	